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**FACSIMILE COMMUNICATIONS**

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To: Honorable Commissioner for Patents  
Washington, D.C. 20231

Date: May 7, 2003

ATTN: Examiner John M. Winter

Number of Pages: Cover + 13

FROM: Caroline T. Do, Esq.

TELEPHONE NO. 703-305-3971

FAX NO.: (703) 305-7687

RE: USSN: 09/295,826

Filed: 4/21/99

Title: System, Method and Article of  
Manufacturing for the Purchase and Use  
of Electronic Content Utilizing a Laser-  
Centric Medium

Inventor: Todd R. Collart

Confirmation No. 7629

Art Unit: 3621

Our Reference: IA 1508.01A

PLEASE CONTACT US IF ANY PAGES  
ARE ILLEGIBLE OR ARE NOT RECEIVED

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**ATTN: Examiner John M. Winter, Art Unit 3621**

Pursuant to our telephone conference of today, attached is the Amendment which was faxed yesterday, May 6, 2003. You will recall that you advised us to resend the Amendment as we did not receive an Auto Fax Confirmation.

Thank you

**OFFICIAL****FAX RECEIVED**

MAY 08 2003

**GROUP 3600**

May 6, 2003



Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



22887

PATENT TRADEMARK OFFICE

RE: Response to Office Action dated February 7, 2003  
Inventor: Todd R. Collart  
TITLE: SYSTEM, METHOD AND ARTICLE OF MANUFACTURE FOR  
THE PURCHASE AND USE OF ELECTRONIC CONTENT UTILIZING A  
LASER-CENTRIC MEDIUM  
USSN: 09/295,826  
Filed: April 21, 1999  
Confirmation No. 7629  
Atty. Docket No.: IA 1508.01A US

Dear Sir:

Enclosed for filing in the above-referenced application are the following:

1. Amendment and Response to Office Action (pages 1-11)
2. Transmittal Form (1 page);
3. Cover Letter (1 page); and
4. Certificate of Facsimile Transmission dated May 6, 2003.

Very truly yours,

DISCOVISION ASSOCIATES

A handwritten signature in cursive script, appearing to read 'Caroline T. Do'.

Caroline T. Do  
Patent Prosecution Attorney  
INTELLECTUAL PROPERTY DEVELOPMENT

CTD:sm

Enclosures

P:\ABG\PPD\IA\1505\01A\PTDCVR\_L07.DOC

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b>	
I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office	
Fax No. <u>703-305-7667</u> on <u>May 6, 2003</u>	
<u>Susan Myers</u> (Type or print name)	A handwritten signature in cursive script, appearing to read 'Susan Myers'.
	(Signature)

Please type a plus sign (+) inside this box ☐

PTO/SB/21 (01-03)

Approved for use through 10/31/2002, OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/295,826
	Filing Date	April 21, 1999
	First Named Inventor	Todd R. Collart
	Art Unit	3621
	Examiner Name	John M. Winter
Total Number of Pages in This Submission	Attorney Docket Number	LA 1508.01A US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):  Cover Letter Certificate of Facsimile Transmission
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	DISCOVISION ASSOCIATES -- Intellectual Property Development 2355 Main Street, Suite 200, Irvine, CA 92614 -- U.S.A. -- Tel: (949) 660-5000
Signature	<i>[Signature]</i>
Date	05/06/03

## CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>May 6, 2003</u>	
Typed or printed name	Susan Myers
Signature	<i>[Signature]</i>
Date	May 6, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:  
Todd R. Collart

Application No.: 09/295,826

Filed: April 21, 1999


For: SYSTEM, METHOD AND  
ARTICLE OF MANUFACTURE FOR THE  
PURCHASE AND USE OF ELECTRONIC  
CONTENT UTILIZING A LASER-  
CENTRIC MEDIUM

Examiner: Winter, John M.

Art Unit: 3621

Confirmation No.: 7629

Docket No.: 1A 1508.01A US

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b>	
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(703) 305-7687	on May 6, 2003
Susan Myers	
(Type or print name)	(Signature)

**AMENDMENT AND RESPONSE TO THE OFFICE ACTION**

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of February 7, 2003, please amend the above-identified Application as follows:

**Amendments to the claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Amendments to the drawings** are discussed on page 8 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.